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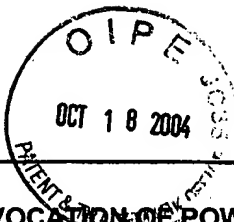
PTO/SB/21 (04-04)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/828,627
	Filing Date	April 05, 2001
	First Named Inventor	WOLKERS, Willem F.
	Art Unit	
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	023070-149610US

ENCLOSURES (Check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard; Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address; Statement Under CFR 3.73(b); and Assignment (COPY - NOT FOR RECORDATION)		
<table border="1"><tr><td>Remarks</td><td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td></tr></table>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Townsend and Townsend and Crew LLP Laurence J. Hyman Reg. No. 35,551
Signature	
Date	October 15, 2004

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Bruce L. Flanders	
Signature		Date October 15, 2004



REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/828,627
	Filing Date	April 15, 2004
	First Named Inventor	Wolkers, Willem F.
	Art Unit	
	Examiner Name	
	Attorney Docket Number	02307O-149610US

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

20350

☐ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

20350

OR

<input type="checkbox"/> Firm or Individual Name					
Address					
Address					
City		State		ZIP	
Country					
Telephone		Fax			

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Linda Stevenson, Manager - Patent Prosecution		
Signature	<i>Linda S Stevenson</i>		
Date	September 17, 2004	Telephone	(510) 587-6000

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.



PTO/SB/98 (08-03)

Attorney Docket No. 023070-149610US

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: WOLKERS et al.Application No./Patent No.: 6,723,497 B2Filed/Issue Date: April 20, 2004Entitled: THERAPEUTIC PLATELETS AND METHODSThe Regents of the University of California, a corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is _____%

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 012105, Frame 0610, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.8]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

September 17, 2004

Date

(510) 587-6000

Telephone number

Linda Stevenson

Typed or printed name

Linda S. Stevenson

Signature

Manager, Patent Prosecution

Title

ASSIGNMENT

I, Nelly Tsvetkova, having a residence at 3114 Newport Terrace, Davis, California 95616 for good and valuable consideration, receipt of which is hereby acknowledged, have assigned and do hereby assign to The Regents of the University of California, a California corporation, having its statewide administrative offices located at 1111 Franklin Street, Twelfth Floor, Oakland, California 94607-5200, and the successors, assigns and legal representatives of the Assignee all of its/their entire right, title and interest in and to all subject matter jointly invented by me with Willem F. Volkers, John H. Crowe, Fern Tablin, Ann E. Oliver, Naomi J. Walker and disclosed in the Patent Applications of the United States entitled:

THERAPEUTIC PLATELETS AND METHODS

and having U.S. Patent Application Serial No. 09/501,773, filed February 10, 2000, and U.S. Patent Application Serial No. 09/828,627, filed April 5, 2001, and to all U.S. Patents issuing thereon, and in and to all Letters Patent and all convention and Treaty rights of all kinds, in all countries throughout the world, for all such subject matter. I agree to sign all documents necessary to secure all said Letters Patent and rights, and request issuance of all said Letters Patent to the above assignee in accordance with this Assignment.

7-31-01, 2001
Date

Lois M. Crowe
Witness Name Printed

Nelly Tsvetkova
Nelly Tsvetkova
Lois M. Crowe
Witness Signature